	·		·	1	RES! AV	AILABLI	E COP	Υ	108	034	
PATEI	_	ON FEE DETERMINATION RECO					Application or Docket Number				
	CLAIMS A				2\		ENTITY		OTHE	R THAN	
TOTAL CLA	MS	(Column 1) (Co			umn 2)	TYPE	FEE	OF		ENTITY	
FOR		NUMBER FILED		NUMBER EXTRA		BASIC			RATE BASIC FE	FEE 770.00	
TOTAL CHAR	GEABLE CLAIMS	26 minus 20= •		•	7	X\$ 9	-14	7	¥2.2	1	
NDEPENDEN	T CLAIMS	/ minus 3 =					>/7		-	 	
AULTIPLE DE	PENDENT CLAIM P	RESENT				X43=		OR	X86=	<u> </u>	
If the differe	nce in column 1 is	less than	zero enter	'0" in	column 2	+145:	:	OR	+290=	<u> </u>	
•	•				column 2	TOTA	439	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2)						SMAL	L ENTITY	OR		R THAN ENTITY	
Total Independe	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER JSLY	(Column 3) PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
Total	.165	Minus	- 2	10	- 139	285-	2475	OR	X\$18=	FEE	
Independe	nt • 8	Minus	3	3.	- 5	MAG	BOA	1	X86=		
FIRST PRI	SENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			avu	OR ·			
	•	•		•		+145=	_	OR	+290= TOTAL		
•	(Column 1)		(Columi	, ás	(Cal 0)	ADDIT. FE	13915.	OFOR	ADDIT. FEE	L	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID FO	ST R ISLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total	• * * •	Minus	•• .		•	X\$ 9=		OR	X\$18=	:	
Independer		Minus	***		•	X43=		OR	X86=		
THIST PHE	SENTATION OF ML	ILTIPLE DE	PENDENT (LAIM		+145=	1	OR	+290=		
			,· .			TOTAL ADDIT. FEE		1,_'	TOTAL ADDIT FEE		
	(Column 1)		(Column		(Column 3)		<u> </u>		• • .		
	REMAINING AFTER AMENDMENT		PREVIOU PAID FO	R SLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total	•	Minus	••		=	X\$ 9=		OR	X\$18=		
Independen		Minus	***		=	X43=		OR	X86=		
I LING! PHE	SENTATION OF MU					+145=		OR	+290=		
	olumn 1 is less than the			•						_	